The Hand Center of San Francisco, Inc

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Hand and Wrist Surgery

Upper Extremity Reconstruction

Microsurgery

Reconstructive Surgery

April 16, 2019

Chubb/WC Po Box 42065 Phoenix, AZ 85080

RE:

Jonathan Shockley

Employer:

Biotelemetry

DOI:

06/25/2018

Claim #:

040519008736

TREATING PHYSICIAN'S PROGRESS REPORT/PR2

Dear Ladies and Gentlemen:

HISTORY OF INJURY This patient has been under my care for treatment of his bilateral upper extremity repetitive strain injury. His current occupation requires intensive sustained a use of a computer and mouse. This has generated a vague bilateral upper extremity pain that has been refractory to conservative management.

PRESENT STATUS Improved.

CURRENT SUBJECTIVE COMPLAINTS The patient continues to report pain in multiple locations in the bilateral hands, wrists, and forearms. These symptoms continue to wax and wane relative to his computer use.

PHYSICAL EXAM Physical exam is entirely within normal limits. Tinel's sign in the ulnar nerve at the elbow and the median nerve at the wrist is negative bilaterally. Forearm compartments are soft and nontender bilaterally. Wrist and digital range of motion is normal, and sensation is intact distally bilaterally.

IMPRESSION/DIAGNOSIS Bilateral upper extremity repetitive strain injury.

TREATMENT RECOMMENDATIONS This patient has a clear case of repetitive strain injury affecting his bilateral upper extremities. He has made some adjustments to his ergonomic workstation and has seen some mild improvement in his symptoms. He continues to report that his pain is exacerbated by a computer use. We will maintain his work restrictions from computer use for the next six weeks. He will also continue working with his occupational hand therapist. I can see him back in six weeks for follow-up.

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